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CONFIRMATION NO. 6681

SERIAL NUMBER 09/928,347	FILING DATE 08/14/2001 RULE	CLASS 375	GROUP/ART UNIT 2631	ATTORNEY DOCKET NO. ARC920010018US1	
APPLICANTS Florian Pestoni, Mountain View, CA; Joel L. Wolf, Golden Bridge, NY; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/17/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
ADDRESS Lacasse & Associates Randy W. Lacasse, Esq. Suite 806 2001 Jefferson Davis Highway Arlington, VA 22202					
TITLE Collaborative content programming					
FILING FEE RECEIVED 844	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 6681

SERIAL NUMBER 09/928,347	FILING DATE 08/14/2001 RULE	CLASS 709	GROUP ART UNIT 2152	ATTORNEY DOCKET NO. ARC920010018US1
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APPLICANTS

Florian Pestoni, Mountain View, CA;
 Joel L. Wolf, Golden Bridge, NY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner Signature: <i>[Signature]</i> Initials: CFF	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
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TITLE
 Collaborative content programming

FILING FEE RECEIVED 844	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Credit _____

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